

**FEC  
FORM 3****REPORT OF RECEIPTS  
AND DISBURSEMENTS**  
For An Authorized Committee

RECEIVED

2014 APR 24 AM 8:37  
Office Use Only1. NAME OF  
COMMITTEE (in full)

TYPE OR PRINT ▼

Example: If typing, type  
over the lines.

12FE4M5

FEC MAIL CENTER

DeFranco for Congress

ADDRESS (number and street)

PO Box 103

Check if different  
than previously  
reported. (ACC)

Middleton

MA

01949

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

STATE ▼ DISTRICT

C

C00547257

3. IS THIS  
REPORT

X

NEW  
(N)

OR

□

AMENDED  
(A)

MA

06

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:

X

April 15 Quarterly Report (Q1)

July 15 Quarterly Report (Q2)

October 15 Quarterly Report (Q3)

January 31 Year-End Report (YE)

Termination Report (TER)

(b) 12-Day PRE-Election Report for the:

Primary (12P)

General (12G)

Runoff (12R)

Convention (12C)

Special (12S)

Election on

M M / D D / Y Y Y Y

in the  
State of

(c) 30-Day POST-Election Report for the:

General (30G)

Runoff (30R)

Special (30S)

Election on

M M / D D / Y Y Y Y

in the  
State of

5. Covering Period

M M / D D / Y Y Y Y  
01 01 2014

through

M M / D D / Y Y Y Y  
03 31 2014

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Kai Moy

Signature of Treasurer

Kai Moy

Kai P. Moy

Date

04 / 15 / 2014

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

Office  
Use  
Only**FEC FORM 3**  
(Revised 02/2003)

# SUMMARY PAGE

of Receipts and Disbursements

Write or Type Committee Name

DeFranco for Congress

Report Covering the Period:

From:

M	M	/	D	D	/	Y	Y	Y	Y
0	1		0	1		2	0	1	4

To:

M	M	/	D	D	/	Y	Y	Y	Y
0	3		3	1		2	0	1	4

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e)) ....	22193.63	24866.00
(b) Total Contribution Refunds (from Line 20(d)) .....	0.00	0.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)) .....	22193.63	24866.00
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17) .....	24823.81	2037.75
(b) Total Offsets to Operating Expenditures (from Line 14) .....	0.00	0.00
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)) .....	24823.81	2037.75
8. Cash on Hand at Close of Reporting Period (from Line 27) .....	31460.56	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	

## For further information contact:

Federal Election Commission  
999 E Street, NW  
Washington, DC 20463

Toll Free 800-424-9530  
Local 202-694-1100

# DETAILED SUMMARY PAGE of Receipts

FEC Form 3 (Revised 12/2003)

PAGE 3 / 21

Write or Type Committee Name

DeFranco for Congress

Report Covering the Period:

From:

MM / DD / YYYY  
01 / 01 / 2014

To:

MM / DD / YYYY  
03 / 31 / 2014

## I. RECEIPTS

### COLUMN A Total This Period

### COLUMN B Election Cycle-to-Date

#### 11. CONTRIBUTIONS (other than loans) FROM:

##### (a) Individuals/Persons Other Than Political Committees

(i) Itemized (use Schedule A) .....

(ii) Unitemized .....

(iii) TOTAL of contributions  
from individuals .....

(b) Political Party Committees .....

(c) Other Political Committees  
(such as PACs) .....

(d) The Candidate .....

(e) TOTAL CONTRIBUTIONS  
(other than loans)  
(add Lines 11(a)(iii), (b), (c), and (d))..

16302.80

5890.83

22193.63

0.00

0.00

0.00

22193.63

16323.00

8543.00

24866.00

0.00

0.00

0.00

24866.00

#### 12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES .....

0.00

0.00

#### 13. LOANS:

(a) Made or Guaranteed by the  
Candidate .....

(b) All Other Loans .....

(c) TOTAL LOANS  
(add Lines 13(a) and (b)) .....

0.00

0.00

0.00

0.00

0.00

0.00

#### 14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.) .....

0.00

0.00

#### 15. OTHER RECEIPTS (Dividends, Interest, etc.) .....

0.00

0.00

#### 16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4) .....

22193.63

24866.00

14031230025

# **DETAILED SUMMARY PAGE** of Disbursements

FEC Form 3 (Revised 02/2003)

PAGE 4 / 21

## **II. DISBURSEMENTS**

### **COLUMN A** **Total This Period**

### **COLUMN B** **Election Cycle-to-Date**

17. OPERATING EXPENDITURES.....

24823.81

2037.75

18. TRANSFERS TO OTHER  
AUTHORIZED COMMITTEES .....

0.00

0.00

19. LOAN REPAYMENTS:

(a) Of Loans Made or Guaranteed  
by the Candidate.....

0.00

0.00

(b) Of All Other Loans .....

0.00

0.00

(c) TOTAL LOAN REPAYMENTS  
(add Lines 19(a) and (b)).....

0.00

0.00

20. REFUNDS OF CONTRIBUTIONS TO:

(a) Individuals/Persons Other  
Than Political Committees .....

0.00

0.00

(b) Political Party Committees.....

0.00

0.00

(c) Other Political Committees  
(such as PACs).....

0.00

0.00

(d) TOTAL CONTRIBUTION REFUNDS  
(add Lines 20(a), (b), and (c)).....

0.00

0.00

21. OTHER DISBURSEMENTS .....

0.00

0.00

22. TOTAL DISBURSEMENTS  
(add Lines 17, 18, 19(c), 20(d), and 21) ►

24823.81

2037.75

## **III. CASH SUMMARY**

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....

34090.74

24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....

22193.63

25. SUBTOTAL (add Line 23 and Line 24).....

56284.37

26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....

24823.81

27. CASH ON HAND AT CLOSE OF REPORTING PERIOD  
(subtract Line 26 from Line 25).....

31460.56

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 5 OF 21

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**DeFranco for Congress**

<b>A.</b> Full Name (Last, First, Middle Initial) <b>John Barbieri</b>			Date of Receipt M M / D D / Y Y Y Y 02 / 01 / 2014	
Mailing Address <b>PO Box 3100</b>			<b>Transaction ID : SA11AI.4732</b>	
City <b>Palos Verdes</b>	State <b>CA</b>	Zip Code <b>90274</b>	Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. <b>C</b>			Amount of Each Receipt this Period 1000.00	
Name of Employer <b>Self</b>		Occupation <b>Maritime Consultant</b>		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 1000.00		
<b>B.</b> Full Name (Last, First, Middle Initial) <b>Richard Bardi Esq.</b>			Date of Receipt M M / D D / Y Y Y Y 03 / 25 / 2014	
Mailing Address <b>6 Beacon Street Ste 800</b>			<b>Transaction ID : SA11AI.4814</b>	
City <b>Boston</b>	State <b>MA</b>	Zip Code <b>02108</b>	Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. <b>C</b>			Amount of Each Receipt this Period 250.00	
Name of Employer <b>Richard C. Bardi &amp; Associates</b>		Occupation <b>Attorney</b>		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 250.00		
<b>C.</b> Full Name (Last, First, Middle Initial) <b>Hale Bradt</b>			Date of Receipt M M / D D / Y Y Y Y 01 / 17 / 2014	
Mailing Address <b>11 Church St Unit 201</b>			<b>Transaction ID : SA11AI.4698</b>	
City <b>Salem</b>	State <b>MA</b>	Zip Code <b>01970</b>	Amount of Each Receipt this Period 65.00	
FEC ID number of contributing federal political committee. <b>C</b>			Amount of Each Receipt this Period 65.00	
Name of Employer <b>Retired</b>		Occupation <b></b>		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 1065.00		
<b>SUBTOTAL</b> of Receipts This Page (optional).....			1315.00	
<b>TOTAL</b> This Period (last page this line number only).....				

14031230027

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 6 OF 21  
(check only one)  
☒ 11a ☐ 11b ☐ 11c ☐ 11d  
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)  
DeFranco for Congress

<b>A.</b> Full Name (Last, First, Middle Initial) Hale Bradt			Date of Receipt MM / DD / YYYY 02 / 24 / 2014	
Mailing Address 11 Church St Unit 201			Transaction ID : SA11AI.4749	
City Salem	State MA	Zip Code 01970	Amount of Each Receipt this Period 200.00	
FEC ID number of contributing federal political committee. C				
Name of Employer Retired		Occupation		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 1265.00		
<b>B.</b> Full Name (Last, First, Middle Initial) Hale Bradt			Date of Receipt MM / DD / YYYY 02 / 26 / 2014	
Mailing Address 11 Church St Unit 201			Transaction ID : SA11AI.4752	
City Salem	State MA	Zip Code 01970	Amount of Each Receipt this Period 87.80	
FEC ID number of contributing federal political committee. C				
Name of Employer Retired		Occupation		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 1352.80		
<b>C.</b> Full Name (Last, First, Middle Initial) Hale Bradt			Date of Receipt MM / DD / YYYY 02 / 27 / 2014	
Mailing Address 11 Church St Unit 201			Transaction ID : SA11AI.4757	
City Salem	State MA	Zip Code 01970	Amount of Each Receipt this Period 1500.00	
FEC ID number of contributing federal political committee. C				
Name of Employer Retired		Occupation		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 2852.80		
<b>SUBTOTAL</b> of Receipts This Page (optional).....			1787.80	
<b>TOTAL</b> This Period (last page this line number only).....				

14031230028

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 7 OF 21

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14	<input type="checkbox"/> 15
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NAME OF COMMITTEE (In Full)  
**DeFranco for Congress**

Full Name (Last, First, Middle Initial)  
**Hale Bradt**

Mailing Address **11 Church St**  
**Unit 201**

City **Salem** State **MA** Zip Code **01970**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**Retired**

Occupation

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

**3052.80**

Date of Receipt

**03 / 28 / 2014**

Transaction ID : **SA11AI.4828**

Amount of Each Receipt this Period

**200.00**

Full Name (Last, First, Middle Initial)  
**Charles Campagne**

Mailing Address **21 Niagara Pier**

City **Erie** State **PA** Zip Code **16507**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**Retired**

Occupation

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

**350.00**

Date of Receipt

**02 / 25 / 2014**

Transaction ID : **SA11AI.4750**

Amount of Each Receipt this Period

**100.00**

Full Name (Last, First, Middle Initial)  
**James Clark**

Mailing Address **48 East Street**

City **Ipswich** State **MA** Zip Code **01938**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

**1200.00**

Date of Receipt

**03 / 01 / 2014**

Transaction ID : **SA11AI.4779**

Amount of Each Receipt this Period

**1000.00**

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

**1300.00**

14031230029

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: (check only one)		PAGE 8 OF 21	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
<input type="checkbox"/> 15			

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NAME OF COMMITTEE (In Full)  
**DeFranco for Congress**

<b>A.</b> Full Name (Last, First, Middle Initial) <b>Judith Conrad</b>			Date of Receipt M M / D D / Y Y Y Y 01 / 10 / 2014	
Mailing Address 106 Warburton St.			Transaction ID : SA11AI.4684	
City	State	Zip Code		
Fall River	MA	02720		
FEC ID number of contributing federal political committee. <b>C</b>			Amount of Each Receipt this Period 300.00	
Name of Employer Self		Occupation Musician		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 400.00		
<b>B.</b> Full Name (Last, First, Middle Initial) <b>Peter Flynn</b>			Date of Receipt M M / D D / Y Y Y Y 03 / 30 / 2014	
Mailing Address 18 Patti Lane			Transaction ID : SA11AI.4837	
City	State	Zip Code		
Maynard	MA	01754		
FEC ID number of contributing federal political committee. <b>C</b>			Amount of Each Receipt this Period 200.00	
Name of Employer		Occupation		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 400.00		
<b>C.</b> Full Name (Last, First, Middle Initial) <b>Elizabeth Fragola</b>			Date of Receipt M M / D D / Y Y Y Y 02 / 25 / 2014	
Mailing Address 13 Philips Ave.			Transaction ID : SA11AI.4751	
City	State	Zip Code		
Rockport	MA	01966		
FEC ID number of contributing federal political committee. <b>C</b>			Amount of Each Receipt this Period 300.00	
Name of Employer Salem State University		Occupation Social Worker		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 600.00		
<b>SUBTOTAL</b> of Receipts This Page (optional).....			800.00	
<b>TOTAL</b> This Period (last page this line number only).....				

14031230030



**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 9 OF 21

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)  
DeFranco for Congress

Full Name (Last, First, Middle Initial)  
Elizabeth Fragola

A. Mailing Address 13 Philips Ave.

City State Zip Code  
Rockport MA 01966

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Salem State University

Occupation  
Social Worker

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

800.00

Date of Receipt

MM / DD / YYYY  
03 / 20 / 2014

Transaction ID : SA11AI.4800

Amount of Each Receipt this Period

200.00

Full Name (Last, First, Middle Initial)  
Elizabeth Fragola

B. Mailing Address 13 Philips Ave.

City State Zip Code  
Rockport MA 01966

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Salem State University

Occupation  
Social Worker

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

MM / DD / YYYY  
03 / 31 / 2014

Transaction ID : SA11AI.4850

Amount of Each Receipt this Period

200.00

Full Name (Last, First, Middle Initial)  
Tom Gee

C. Mailing Address 321 Walnut St  
#235

City State Zip Code  
Newton MA 02460

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
FCD Educational Services

Occupation  
Nonprofit Executive

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

300.00

Date of Receipt

MM / DD / YYYY  
02 / 28 / 2014

Transaction ID : SA11AI.4768

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional).....

500.00

TOTAL This Period (last page this line number only).....

14031230031

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 10 OF 21

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
12	13a	13b	14
			15

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NAME OF COMMITTEE (In Full)  
**DeFranco for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Tom Gee**

Mailing Address **321 Walnut St**  
**#235**

City **Newton** State **MA** Zip Code **02460**

FEC ID number of contributing federal political committee. **C**

Name of Employer **FCD Educational Services** Occupation **Nonprofit Executive**

Receipt For: 2014  
☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date  
**400.00**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3		2	7		2	0	1	4

Transaction ID : **SA11AI.4826**

Amount of Each Receipt this Period

<b>100.00</b>
---------------

**B.** Full Name (Last, First, Middle Initial)  
**Rodd Halstead**

Mailing Address **153 Tower Road**

City **Lincoln** State **MA** Zip Code **01773**

FEC ID number of contributing federal political committee. **C**

Name of Employer **Dassault** Occupation **Software Developer Mgr.**

Receipt For: 2014  
☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date  
**1650.00**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	1		0	9		2	0	1	4

Transaction ID : **SA11AI.4681**

Amount of Each Receipt this Period

<b>1250.00</b>
----------------

**C.** Full Name (Last, First, Middle Initial)  
**Rodd Halstead**

Mailing Address **153 Tower Road**

City **Lincoln** State **MA** Zip Code **01773**

FEC ID number of contributing federal political committee. **C**

Name of Employer **Dassault** Occupation **Software Developer Mgr.**

Receipt For: 2014  
☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date  
**2650.00**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3		1	4		2	0	1	4

Transaction ID : **SA11AI.4790**

Amount of Each Receipt this Period

<b>1000.00</b>
----------------

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

<b>2350.00</b>
----------------

14031230032

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 11 OF 21

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)  
DeFranco for Congress

<b>A.</b> Full Name (Last, First, Middle Initial) Bob Holloway			Date of Receipt M M / D D / Y Y Y Y 03 / 12 / 2014	
Mailing Address 8 Pine Ridge Road			Transaction ID : SA11AI.4789	
City	State	Zip Code		
Topsfield	MA	01983		
FEC ID number of contributing federal political committee. C			Amount of Each Receipt this Period 250.00	
Name of Employer MacLean Holloway Doherty		Occupation Lawyer		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 500.00		
<b>B.</b> Full Name (Last, First, Middle Initial) Karen Hourigan			Date of Receipt M M / D D / Y Y Y Y 02 / 27 / 2014	
Mailing Address 114 Beulah Street #1			Transaction ID : SA11AI.4758	
City	State	Zip Code		
San Francisco	CA	94117		
FEC ID number of contributing federal political committee. C			Amount of Each Receipt this Period 500.00	
Name of Employer Redgrave, LLP		Occupation Attorney		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 500.00		
<b>C.</b> Full Name (Last, First, Middle Initial) Carol Kelly			Date of Receipt M M / D D / Y Y Y Y 02 / 28 / 2014	
Mailing Address 2 Ruben Duren Way			Transaction ID : SA11AI.4769	
City	State	Zip Code		
Bedford	MA	01730		
FEC ID number of contributing federal political committee. C			Amount of Each Receipt this Period 200.00	
Name of Employer Retired		Occupation		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 380.00		
<b>SUBTOTAL</b> of Receipts This Page (optional).....			950.00	
<b>TOTAL</b> This Period (last page this line number only).....				

14031230033

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:

PAGE 12 OF 21

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)  
**DeFranco for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Vladimir Mishin**

Mailing Address

City State Zip Code

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For: 2014  
☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date  
225.00

Date of Receipt

MM / DD / YYYY  
03 / 31 / 2014

Transaction ID : SA11AI.4851

Amount of Each Receipt this Period

50.00

**B.** Full Name (Last, First, Middle Initial)  
**Kai Hong Moy MD**

Mailing Address 66 Sycamore Drive

City State Zip Code  
Reading PA 19606

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Lehigh Valley Health Network Pediatrician

Receipt For: 2014  
☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt

MM / DD / YYYY  
02 / 28 / 2014

Transaction ID : SA11AI.4770

Amount of Each Receipt this Period

250.00

**C.** Full Name (Last, First, Middle Initial)  
**Gerald Palmer**

Mailing Address 152 Crompton Ave

City State Zip Code  
Lincoln MA 01773

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Hudson Services Businessman

Receipt For: 2014  
☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date  
5200.00

Date of Receipt

MM / DD / YYYY  
01 / 15 / 2014

Transaction ID : SA11AI.4695

Amount of Each Receipt this Period

2600.00

**SUBTOTAL** of Receipts This Page (optional)

**TOTAL** This Period (last page this line number only)

2900.00

14031230034

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 13 OF 21

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)  
DeFranco for Congress

A.

Full Name (Last, First, Middle Initial)  
Jean Palmer

Mailing Address 247 Tower Road

City Lincoln State MA Zip Code 01773

FEC ID number of contributing  
federal political committee. C

Name of Employer  
Self

Occupation  
Editor

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

2600.00

Date of Receipt

MM / DD / YYYY  
01 / 25 / 2014

Transaction ID : SA11AI.4728

Amount of Each Receipt this Period

2600.00

B.

Full Name (Last, First, Middle Initial)  
Herb Robinson

Mailing Address 116 Carver Road

City Newton Highlands State MA Zip Code 02461

FEC ID number of contributing  
federal political committee. C

Name of Employer  
Stratus

Occupation  
Engineer

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1500.00

Date of Receipt

MM / DD / YYYY  
01 / 23 / 2014

Transaction ID : SA11AI.4721

Amount of Each Receipt this Period

500.00

C.

Full Name (Last, First, Middle Initial)  
Herb Robinson

Mailing Address 116 Carver Road

City Newton Highlands State MA Zip Code 02461

FEC ID number of contributing  
federal political committee. C

Name of Employer  
Stratus

Occupation  
Engineer

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

2600.00

Date of Receipt

MM / DD / YYYY  
03 / 25 / 2014

Transaction ID : SA11AI.4823

Amount of Each Receipt this Period

1100.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

4200.00

14031230035

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 14 OF 21

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14	<input type="checkbox"/> 15
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NAME OF COMMITTEE (In Full)  
**DeFranco for Congress**

<b>A.</b> Full Name (Last, First, Middle Initial) Eddy Staco			Date of Receipt MM / DD / YYYY 01 / 22 / 2014	
Mailing Address 86 Fairview Ave			Transaction ID : SA11AI.4706	
City Peabody	State MA	Zip Code 01960	Amount of Each Receipt this Period 200.00	
FEC ID number of contributing federal political committee. C				
Name of Employer Self		Occupation Attorney		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 300.00		
<b>B.</b> Full Name (Last, First, Middle Initial)			Date of Receipt	
Mailing Address			MM / DD / YYYY	
City	State	Zip Code	Amount of Each Receipt this Period	
FEC ID number of contributing federal political committee. C				
Name of Employer		Occupation		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date		
<b>C.</b> Full Name (Last, First, Middle Initial)			Date of Receipt	
Mailing Address			MM / DD / YYYY	
City	State	Zip Code	Amount of Each Receipt this Period	
FEC ID number of contributing federal political committee. C				
Name of Employer		Occupation		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date		
<b>SUBTOTAL</b> of Receipts This Page (optional).....			200.00	
<b>TOTAL</b> This Period (last page this line number only).....			16302.80	

14031230036

# **SCHEDULE B (FEC Form 3)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 15 OF 21

☒ 17 ☐ 18 ☐ 19a ☐ 19b  
☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)

DeFranco for Congress

Full Name (Last, First, Middle Initial)

A. ActBlue

Mailing Address

City

State

Zip Code

Purpose of Disbursement  
Fees

003

Candidate Name

DeFranco for Congress

Category/  
Type

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2014

☒ Primary ☐ General  
☐ Other (specify)

State: MA

District: 06

Date of Disbursement

MM / DD / YYYY  
03 / 31 / 2014

Amount of Each Disbursement this Period

370.47

Transaction ID : SB17.4916

Full Name (Last, First, Middle Initial)

B. Regina Clewell

Mailing Address

City

State

Zip Code

Purpose of Disbursement  
Website Updates

001

Candidate Name

DeFranco for Congress

Category/  
Type

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2014

☒ Primary ☐ General  
☐ Other (specify)

State: MA

District: 06

Date of Disbursement

MM / DD / YYYY  
02 / 18 / 2014

Amount of Each Disbursement this Period

118.00

Transaction ID : SB17.4884

Full Name (Last, First, Middle Initial)

C. Connolly Printing

Mailing Address 17B Gill Street

City

State

Zip Code

Woburn

MA

01801

Purpose of Disbursement  
TShirts

006

Candidate Name

DeFranco for Congress

Category/  
Type

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2014

☒ Primary ☐ General  
☐ Other (specify)

State: MA

District: 06

Date of Disbursement

MM / DD / YYYY  
02 / 28 / 2014

Amount of Each Disbursement this Period

353.71

Transaction ID : SB17.4887

SUBTOTAL of Disbursements This Page (optional).....

842.18

TOTAL This Period (last page this line number only).....

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 16 OF 21

☒ 17 ☐ 18 ☐ 19a ☐ 19b  
☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)

DeFranco for Congress

Full Name (Last, First, Middle Initial)

A. Daniel Kadin & Associates

Mailing Address

City State Zip Code  
New York NY

Purpose of Disbursement

Candidate Name  
DeFranco for Congress

Office Sought: ☒ House ☐ Senate ☐ President  
Disbursement For: 2014 ☒ Primary ☐ General  
☐ Other (specify)

State: MA District: 06

Date of Disbursement

MM / DD / YYYY  
01 / 21 / 2014

Amount of Each Disbursement this Period

1000.00

Transaction ID : SB17.4872

003

Category/  
Type

Full Name (Last, First, Middle Initial)

B. Daniel Kadin & Associates

Mailing Address

City State Zip Code  
New York NY

Purpose of Disbursement

Candidate Name  
DeFranco for Congress

Office Sought: ☒ House ☐ Senate ☐ President  
Disbursement For: 2014 ☒ Primary ☐ General  
☐ Other (specify)

State: MA District: 06

Date of Disbursement

MM / DD / YYYY  
02 / 18 / 2014

Amount of Each Disbursement this Period

207.50

Transaction ID : SB17.4882

003

Category/  
Type

Full Name (Last, First, Middle Initial)

C. Tom Duggan

Mailing Address

City State Zip Code  
North Andover MA

Purpose of Disbursement  
Consulting

Candidate Name  
DeFranco for Congress

Office Sought: ☒ House ☐ Senate ☐ President  
Disbursement For: 2014 ☒ Primary ☐ General  
☐ Other (specify)

State: MA District: 06

Date of Disbursement

MM / DD / YYYY  
01 / 23 / 2014

Amount of Each Disbursement this Period

300.00

Transaction ID : SB17.4874

001

Category/  
Type

SUBTOTAL of Disbursements This Page (optional)

1507.50

TOTAL This Period (last page this line number only)

14031230038



**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 17 OF 21

☒ 17 ☐ 18 ☐ 19a ☐ 19b  
☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)  
DeFranco for Congress

Full Name (Last, First, Middle Initial)

**A. Facebook**

Mailing Address

City State Zip Code

Purpose of Disbursement  
Advertising

004

Candidate Name  
DeFranco for Congress

Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2014  
☒ Primary ☐ General  
☐ Other (specify)

State: MA District: 06

Date of Disbursement

MM / DD / YYYY  
01 / 02 / 2014

Amount of Each Disbursement this Period

33.90

Transaction ID : SB17.4861

Full Name (Last, First, Middle Initial)

**B. Maura Flynn**

Mailing Address

City State Zip Code

Purpose of Disbursement  
December

001

Candidate Name  
DeFranco for Congress

Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2014  
☒ Primary ☐ General  
☐ Other (specify)

State: MA District: 06

Date of Disbursement

MM / DD / YYYY  
01 / 02 / 2014

Amount of Each Disbursement this Period

500.00

Transaction ID : SB17.4862

Full Name (Last, First, Middle Initial)

**C. Maura Flynn**

Mailing Address

City State Zip Code

Purpose of Disbursement  
January

001

Candidate Name  
DeFranco for Congress

Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2014  
☒ Primary ☐ General  
☐ Other (specify)

State: MA District: 06

Date of Disbursement

MM / DD / YYYY  
01 / 31 / 2014

Amount of Each Disbursement this Period

1000.00

Transaction ID : SB17.4864

SUBTOTAL of Disbursements This Page (optional).....

1533.90

TOTAL This Period (last page this line number only).....

14031230039

**SCHEDULE B (FEC Form 3)**  
**ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 18 OF 21

☒ 17 18 19a 19b  
20a 20b 20c 21

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NAME OF COMMITTEE (In Full)  
DeFranco for Congress

Full Name (Last, First, Middle Initial)

**A. Maura Flynn**

Mailing Address

City State Zip Code

Purpose of Disbursement  
February

Candidate Name  
DeFranco for Congress

Office Sought: ☒ House ☐ Senate ☐ President  
Disbursement For: 2014 ☒ Primary ☐ General ☐ Other (specify)

State: MA District: 06

Full Name (Last, First, Middle Initial)

**B. Giggles Comedy Club**

Mailing Address 517 Broadway

City State Zip Code  
Saugus MA 01906

Purpose of Disbursement  
Fundraiser

Candidate Name  
DeFranco for Congress

Office Sought: ☒ House ☐ Senate ☐ President  
Disbursement For: 2014 ☒ Primary ☐ General ☐ Other (specify)

State: MA District: 06

Full Name (Last, First, Middle Initial)

**C. Hotels.com**

Mailing Address

City State Zip Code

Purpose of Disbursement  
DC Hotel

Candidate Name  
DeFranco for Congress

Office Sought: ☒ House ☐ Senate ☐ President  
Disbursement For: 2014 ☒ Primary ☐ General ☐ Other (specify)

State: MA District: 06

Date of Disbursement

MM / DD / YYYY  
02 / 28 / 2014

Amount of Each Disbursement this Period

1500.00

Transaction ID : SB17.4865

Date of Disbursement

MM / DD / YYYY  
01 / 23 / 2014

Amount of Each Disbursement this Period

500.00

Transaction ID : SB17.4893

Date of Disbursement

MM / DD / YYYY  
03 / 04 / 2014

Amount of Each Disbursement this Period

283.96

Transaction ID : SB17.4908

SUBTOTAL of Disbursements This Page (optional).....

TOTAL This Period (last page this line number only).....

2283.96

14031230040

**SCHEDULE B (FEC Form 3)**  
**ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 19 OF 21

☒ 17 ☐ 18 ☐ 19a ☐ 19b  
☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)  
**DeFranco for Congress**

Full Name (Last, First, Middle Initial)

**A. North Woods Advertising**

Mailing Address PO Box 3817

City Minneapolis State MN Zip Code 55403

Purpose of Disbursement  
Campaign Consulting

004

Candidate Name  
**DeFranco for Congress**

Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2014  
☒ Primary ☐ General  
☐ Other (specify)

State: MA District: 06

Date of Disbursement

MM / DD / YYYY  
03 / 08 / 2014

Amount of Each Disbursement this Period

591.01

Transaction ID : SB17.4900

**B. North Woods Advertising**

Mailing Address PO Box 3817

City Minneapolis State MN Zip Code 55403

Purpose of Disbursement  
Campaign Consulting

004

Candidate Name  
**DeFranco for Congress**

Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2014  
☒ Primary ☐ General  
☐ Other (specify)

State: MA District: 06

Date of Disbursement

MM / DD / YYYY  
03 / 08 / 2014

Amount of Each Disbursement this Period

12500.00

Transaction ID : SB17.4902

**C. Paul Simmons**

Mailing Address

City Boston State MA Zip Code

Purpose of Disbursement  
Research Consulting

001

Candidate Name  
**DeFranco for Congress**

Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2014  
☒ Primary ☐ General  
☐ Other (specify)

State: MA District: 06

Date of Disbursement

MM / DD / YYYY  
02 / 18 / 2014

Amount of Each Disbursement this Period

150.00

Transaction ID : SB17.4883

SUBTOTAL of Disbursements This Page (optional).....

13241.01

TOTAL This Period (last page this line number only).....

14031230041

**SCHEDULE B (FEC Form 3)**  
**ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 20 OF 21

☒ 17 ☐ 18 ☐ 19a ☐ 19b  
☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (If Full)

DeFranco for Congress

Full Name (Last, First, Middle Initial)

**A. Su Chang's**

Mailing Address

Date of Disbursement

MM / DD / YYYY  
02 / 07 / 2014

City State Zip Code  
Peabody MA 01960

Amount of Each Disbursement this Period

Purpose of Disbursement  
Event Deposit

007

100.00

Transaction ID : SB17.4881

Candidate Name  
DeFranco for Congress

Category/  
Type

Office Sought: ☒ House ☐ Senate ☐ President  
State: MA District: 06

Disbursement For: 2014  
☒ Primary ☐ General  
☐ Other (specify)

**B. Thriftco Printing**

Mailing Address 26 Howley Street

Date of Disbursement

MM / DD / YYYY  
03 / 21 / 2014

City State Zip Code  
Peabody MA 01960

Amount of Each Disbursement this Period

Purpose of Disbursement  
Invites & Palm Cards

006

927.56

Transaction ID : SB17.4905

Candidate Name  
DeFranco for Congress

Category/  
Type

Office Sought: ☒ House ☐ Senate ☐ President  
State: MA District: 06

Disbursement For: 2014  
☒ Primary ☐ General  
☐ Other (specify)

**C. USPS**

Mailing Address 43 South Main Street

Date of Disbursement

MM / DD / YYYY  
03 / 21 / 2014

City State Zip Code  
Middleton MA 01949

Amount of Each Disbursement this Period

Purpose of Disbursement  
Stamps

001

196.00

Transaction ID : SB17.4906

Candidate Name  
DeFranco for Congress

Category/  
Type

Office Sought: ☒ House ☐ Senate ☐ President  
State: MA District: 06

Disbursement For: 2014  
☒ Primary ☐ General  
☐ Other (specify)

SUBTOTAL of Disbursements This Page (optional).....

TOTAL This Period (last page this line number only).....

1223.56

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 21 OF 21

☒ 17 ☐ 18 ☐ 19a ☐ 19b  
☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)

DeFranco for Congress

Full Name (Last, First, Middle Initial)

A. Williams and Associates

Mailing Address

City

State

Zip Code

Purpose of Disbursement

005

Candidate Name

DeFranco for Congress

Category/  
Type

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2014

☒ Primary ☐ General  
☐ Other (specify)

State: MA

District: 06

Date of Disbursement

M M / D D / Y Y Y Y  
01 / 17 / 2014

Amount of Each Disbursement this Period

1500.00

Transaction ID : SB17.4868

Full Name (Last, First, Middle Initial)

B. Williams and Associates

Mailing Address

City

State

Zip Code

Purpose of Disbursement

005

Candidate Name

DeFranco for Congress

Category/  
Type

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2014

☒ Primary ☐ General  
☐ Other (specify)

State: MA

District: 06

Date of Disbursement

M M / D D / Y Y Y Y  
01 / 31 / 2014

Amount of Each Disbursement this Period

1500.00

Transaction ID : SB17.4880

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Category/  
Type

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M / D D / Y Y Y Y

Amount of Each Disbursement this Period

3000.00

23632.11

SUBTOTAL of Disbursements This Page (optional).....

TOTAL This Period (last page this line number only).....

14031230043

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FROM: Marisa DeFranco, Esq.  
PO Box 103  
Middleton, MA 01949

TO: *FEL*

999 E STREET, NW  
WASHINGTON, DC 20463

Label 228, July 2013

FOR DOMESTIC AND INTERNATIONAL USE

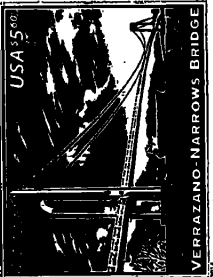


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Federal Election Commission  
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<input checked="" type="checkbox"/> USPS Priority Mail	Postmarked
<input type="checkbox"/> USPS Priority Mail Express	Postmarked
<input type="checkbox"/> Postmark Illegible	
<input checked="" type="checkbox"/> No Postmark	
<input type="checkbox"/> Overnight Delivery Service (Specify):	Shipping Date
	Next Business Day Delivery <input type="checkbox"/>
<input type="checkbox"/> Received from House Records & Registration Office	Date of Receipt
<input type="checkbox"/> Received from Senate Public Records Office	Date of Receipt
<input type="checkbox"/> Received from Electronic Filing Office	Date of Receipt
<input type="checkbox"/> Other (Specify):	Date of Receipt or Postmarked
 PREPARER (8/2013)	4/24/14 DATE PREPARED

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